

RULE-MAKING ORDER

CR-103 (June 2004)

	(Implements RCW 34.05.360)						
Agency: Department of Social and Health Services, Aging and Disability Services Administration	☐ Permanent Rule ☐ Emergency Rule						
Effective date of rule:	fective date of rule:						
Permanent Rules	Emergency Rules						
☐ 31 days after filing.	☐ Immediately upon filing.						
finding under RCW 34.05.380(3) is required and should be stated below)							
Any other findings required by other provisions of law as precondition to adoption or effectiveness of rule?							
☐ Yes ☐ No If Yes, explain:	· · · · · · · · · · · · · · · · · · ·						
Purpose: The purpose of the amended sections is to expand the population eligib (SSP) to include certain individuals in residential settings; to clarify and who were previously on Family Support are eligible to receive; to expan Security Income to qualify for SSP; and to establish rules allowing one-to-Citation of existing rules affected by this order: Repealed: None	ncrease the amount of SSP certain individuals d the window for the receipt of Supplemental						
Amended: WAC 388-827-0115 and WAC 388-827-0145 Suspended: None							
Statutory authority for adoption: RCW 71A.12.030, RCW 74.04.05	7						
Other authority: None							
PERMANENT RULE ONLY (Including Expedited Rule Making)	8 0						
Adopted under notice filed as WSR on(da							
Describe any changes other than editing from proposed to adopted ver	Sion: "Added by DSHS after filing"						
If a preliminary cost-benefit analysis was prepared under RCW 34.05.3 contacting:							
Name: phone ()	PERMANENT						
Address: fax ()	EMERGENCY						
e-mail							
Under RCW 34.05.350 the agency for good cause finds: That immediate adoption, amendment, or repeal of a rule is necessary for the preservation of the public health, safety, or general welfare, and that observing the time requirements of notice and opportunity to comment upon adoption of a permanent rule would be contrary to the public interest. That state or federal law or federal rule or a federal deadline for state receipt of federal funds requires immediate adoption of a rule. Reasons for this finding: In order to receive federal funding for Title XIX Medicaid, the state is required to expend a certain amount of State Supplementary Payments (SSP) to meet a yearly maintenance of effort established by the federal Social Security Administration as specified in 20 CFR 416.2099. By expanding the population eligible to receive SSP, clarifying and increasing the amount of SSP to certain individuals, expanding the window for the receipt of Supplemental Security Income to qualify for SSP, and allowing the authorization of one-time payments, the state will achieve this maintenance of effort. This emergency rule replaces the emergency rule filed as WSR 06-14-060 on June 30, 2006. The department has begun the permanent rule-making process as the preproposal statement of inquiry was filed as WSR 06-17-138 on August 22, 2006 and the Proposed Rule Making Notice, CR-102, will be filed within the next 120 days.							
Date adopted: 8/23/06	CODE REVISER USE ONLY						
NAME (TYPE OR PRINT) Andy Fernando	CODE DEVISOR OF SIGE STATE OF SINGTON FILED						
SIGNATURE	AUG 3 2000						
/ TIME_							
TITLE WSR_	06-18-056 PM)						

(COMPLETE REVERSE SIDE)

Manager, Rules and Policies Assistance Unit

Note: If any category is left blank, it will be calculated as zero. No descriptive text.

Count by whole WAC sections only, from the WAC number through the history note.

A section may be counted in more than one category.

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The number of sections adopted in o	rder to co	mply with:					
Federal statute:	New	-	Amended		Repealed		
Federal rules or standards:	New		Amended		Repealed		
Recently enacted state statutes:	New		Amended		Repealed		
The number of sections adopted at th	ne request	of a nongo	overnmental e	ntity:			
	New		Amended	_	Repealed	_	
				¥ 0			
The number of sections adopted in th	ne agency'	s own initia	ative:				
	New		Amended		Repealed		
The number of acetions adopted in a	udau ta ala		line en meferm				
The number of sections adopted in or	rder to cia	rity, stream	lline, or retorn	n agency p	procedures:		
	New		Amended	_2_	Repealed		
The number of sections adopted usin	g:						
Negotiated rule making:	New	_	Amended	_	Repealed		
Pilot rule making:	New		Amended		Repealed		
Other alternative rule making:	New		Amended	_2_	Repealed		

AMENDATORY SECTION (Amending WSR 05-10-039, filed 4/28/05, effective 5/29/05)

WAC 388-827-0115 What are the programmatic eligibility requirements for DDD/SSP? (1) You received one or more of the following services from DDD with state-only funding between March 1, 2001 and June 30, 2003 and continue to demonstrate a need for and meet the DDD program eligibility requirements for these services. Additionally, you must have been eligible for or received SSI prior to July 1, ((2003)) 2006; or you received Social Security Title II benefits as a disabled adult child prior to July 1, ((2003)) 2006 and would have been eligible for SSI if you did not receive these benefits.

- (a) Certain voluntary placement program services, which include:
 - (i) Foster care basic maintenance,
 - (ii) Foster care specialized support,
 - (iii) Agency specialized support,
 - (iv) Staffed residential home,
 - (v) Out-of-home respite care,
 - (vi) Agency in-home specialized support,
 - (vii) Group care basic maintenance,
 - (viii) Group care specialized support,
 - (ix) Transportation,
 - (x) Agency attendant care,
 - (xi) Child care,
 - (xii) Professional services,
 - (xiii) Nursing services,
 - (xiv) Interpreter services,
 - (b) Family support;
 - (c) One or more of the following residential services:
 - (i) Adult family home,
 - (ii) Adult residential care facility,
 - (iii) Alternative living,
 - (iv) Group home,
 - (v) Supported living,
 - (vi) Agency attendant care,
 - (vii) Supported living or other residential service allowance,
- (viii) Intensive individual supported living support (companion homes).
- (2) For individuals with community protection issues as defined in WAC 388-820-020, the department will determine eligibility for SSP on a case-by-case basis.
 - (3) For new authorizations of family support opportunity:
- (a) You were on the family support opportunity waiting list prior to January 1, 2003; and
- (b) You are on the home and community based services (HCBS) waiver administered by DDD; and
- (c) You continue to meet the eligibility requirements for the family support opportunity program contained in WAC 388-825-200 through 388-825-242; and

(d) You must have been eligible for or received SSI prior to July 1, 2003; or you received Social Security Title II benefits as a disabled adult child prior to July 1, 2003 and would have been eligible for SSI if you did not receive these benefits.

(4) For individuals on one of the HCBS waivers administered by

DDD (Basic, Basic Plus, Core or community protection):

(a) You must have been eligible for or received SSI prior to April 1, 2004; and

(b) You were determined eligible for SSP prior to April 1,

2004.

(5) You received Medicaid personal care (MPC) between

September 2003 and August 2004; and

(a) You are under age eighteen at the time of your initial comprehensive assessment and reporting evaluation (CARE) assessment;

(b) You received or were eligible to receive SSI at the time

of your initial CARE assessment;

(c) You are not on a home and community based services waiver administered by DDD; and

(d) You live with your family, as defined in WAC 388-825-020.

(6) If you meet all of the requirements listed in (5) above,

your SSP will continue.

- (7) You received one or more of the following state-only funded residential services between July 1, 2003 and June 30, 2006 and continue to demonstrate a need for and meet the DDD program eligibility requirements for these services:
 - (a) Adult residential care facility;

(b) Alternative living;

(c) Group home;

(d) Supported living;

(e) Agency attendant care;

(f) Supported living or other residential allowance.

AMENDATORY SECTION (Amending WSR 05-10-039, filed 4/28/05, effective 5/29/05)

WAC 388-827-0145 How much money will I receive? The purpose of the SSP is to increase the amount of income to meet your needs. The department will determine your payment amount based on your living arrangement and your assessed needs.

(1) For residential and voluntary placement program services, the amount of your SSP will be based on the amount of state-only dollars spent on certain services at the time the funding source was converted to SSP. If the type of your residential living arrangement changes, your need will be reassessed and your payment adjusted based on your new living arrangement and assessed need.

(2) For family support services, refer to WAC 388-825-200 through ((388-825-284)) 388-825-256.

(a) If you are on the home and community based services (HCBS) waiver administered by DDD:

(i) You will receive nine hundred dollars DDD/SSP money per year to use as you determine.

(ii) The remainder up to the maximum allowed may be authorized by DDD to purchase HCBS waiver services and will be paid directly

to the provider.

(b) If you are not on the HCBS waiver administered by DDD, and you received state-only funding for the Traditional Family Support Program between March 1, 2001 and June 30, 2003 the amount of your SSP will be based on the yearly maximum allowed at the time the funding source was converted to SSP unless your need changes.

(i) Need is based on your Service Need Level and whether you receive Medicaid Personal Care as specified in WAC 388-825-254.

(ii) If your need changes, the amount of your SSP will be adjusted accordingly.

(c) If you are not on the HCBS waiver administered by DDD, and you received state-only funding for the Family Support Opportunity Program between March 1, 2001 and June 30, 2003 the amount of your SSP will be fifteen hundred dollars per year.

(d) The yearly amount of DDD/SSP money will be prorated into monthly amounts. You will receive one twelfth of the yearly amount

each month.

(3) If you are eligible for SSP because you meet the criteria in WAC 388-827-0115 (5), you will receive one hundred dollars per month.

(((a) For individuals whose initial CARE assessment was completed prior to January 1, 2005, January 2005 is the first month

for which payment is made.

(b) For individuals whose initial CARE assessment is completed after December 31, 2004, the first month for which payment is made is the month in which the results of the initial CARE assessment are effective.))

(4) DDD may authorize additional payments to certain individuals if the SSP budget has sufficient funds to allow this

payment.